## TRANSMITTAL FORM



**Electronic Version 1.0.2** 

Stylesheet Version: 1.0

## ELECTRIC-MAGNETIC FIELD MOTIVATOR

First Named Inventor: Mr. Steven Mezinis

SUBMITTED BY

Name:

Mr. Steven Mezinis

Electronic Signature Mark: Steven

Mężinis

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Attached Files:

bibd-transmittal

mot1apds.xml

fee-transmittal

mot1fee.xml

specification

Motivator.xml

declaration

declaration.tif

Attached Image File(s):

declaration.tif

APPLICATION NUMBER: 09682451

FIRST NAMED INVENTOR: Steven Mezinis

TITLE OF INVENTION: ELECTRIC-MAGNETIC FIELD MOTIVATOR

ATTORNEY DOCKET NUMBER:

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FILE LISTING:
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tranmot1.xml 5099 Bytes motlapds.xml 3465 Bytes u-bibdat.dtd 35690 Bytes e-bibdat.xsl 22130 Bytes mot1fee.xml 2804 Bytes u-feetra.dtd 36714 Bytes e-feetra.xsl 14377 Bytes Motivator.xml 21540 Bytes u-specif.dtd 106427 Bytes specif.xsl 29904 Bytes Figure1.TIF 16168604 Bytes Figure2.TIF 14453606 Bytes Figure3.TIF 12488788 Bytes Figure4.TIF 15951808 Bytes Figure 5.TIF 15417538 Bytes Figure6.TIF 15165056 Bytes declaration.tif 24515940 Bytes

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TIMESTAMP: Wed Sep 05 07:22:33 EDT 2001
MESSAGE DIGEST: dB+7xScpScU4DhIRrprQ6w==
DIGITAL CERTIFICATE HOLDER NAME: cn=Steven Joshua Mezinis, ou=Independent Inventors
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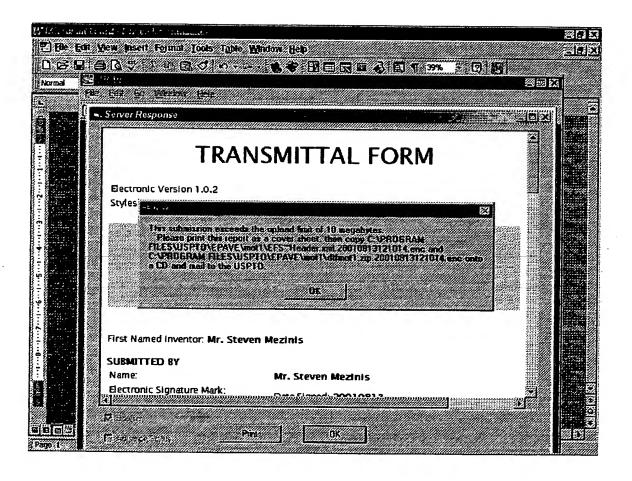
Steven Mezinis 27802 bullx2@earthlink.net

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To whom it may concern:

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Sincerely, Steven Mezinis





## FEE TRANSMITTAL

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Patent fees are subject to annual revisions on or about October 1st of each year.

Small Entity

Independent Inventor

**TOTAL FEES AUTHORIZED: \$355** 

**BANK (CREDIT) CARD INFORMATION:** 

Credit Card Number:

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Expiration Date:

20020701

Authorized Name:

Steven S Mezinis

Billing Address:

95004-9717

BASIC FILING FEE

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| Fee Description    | Fee Code | Fee Paid<br>\$ 355 |  |
|--------------------|----------|--------------------|--|
| Utility Filing Fee | 201      |                    |  |
| 0.27               |          |                    |  |

Subtotal For Basic Filing Fee: \$ 355

## **EXTRA CLAIM FEES**

|                 | Fee Code | Fee  | Extra Claims | Fee Paid |
|-----------------|----------|------|--------------|----------|
| Total Claims: 7 | 203      | \$ 9 | 0            | \$ 0     |

Subtotal For Extra Claims Fees: \$ 0